PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10631966

| 10.01450 | | | | | | | | | | | | |
|---|---|---|---------------------------------------|--|---------------------|------------------|--------------|-------------|------------------------|----------------|-----------------------|------------------------|
| - | | CLAIMS A | S FILED - PART I (Column 1) (Co | | | mn 2) | SMALL ENTITY | | OR | OTHER SMALL | | |
| TOTAL CLAIMS | | | 13 | | | | RA | TE | FEE | | RATE | FEE |
| FOR | | | NUMBER | FILED | NUMBER EXTRA | | BASI | C FEE | 385.00 | OR | BASIC FEE | 770.00 |
| TOTAL CHARGEABLE CLAIMS | | | 13 mir | nus 20= | . 0 | | XS | 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS . | | | minus 3 = * | | | 0 | | 3= | | OR | X86= | |
| ΜL | JLTIPLE DEPEN | IDENT CLAIM PI | RESENT | | | | | 15= | | OR | +·290= | |
| * If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | TO: | ΓAL | | OŖ | TOTAL | 770 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) | | | | | | (Column 3) | SM | ALL. | ENTITY | OR | OTHER SMALL I | 1 |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | · | HIGH NUME PREVIC PAID: | EST BER DUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NON | Total | * | Minus | ** | , | = | xs | 9= | | OR | X\$18= | |
| AME | Independent | * | Minus | *** | | = | X4 | 3= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +14 | 5= | | OR | +290= | |
| | | | | | | | | OTAL FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | | | | _ | | | | | |
| AMENDMENT B | | CLAIMS RÉMAINING AFTER AMENDMENT | | HIGH NUMI PREVIC PAID | BER DUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDM | Total | * | Minus | ** | | = . | XS | 9= | | OR | X\$18= | |
| AME | Independent | * | Minus | *** | CI 4144 | - | X4 | 3= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | 5= | | OR | +290= | |
| | | | | | | | ADDIT | OTAL FEE | | | TOTAL ADDIT. FEE | |
| | | | | | | | | | | | | |
| AMENDMENT C | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Colur HIGH NUME PREVIC PAID | EST BER DUSLY | PRESENT EXTRA | FA | ΤE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | XŞ | 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X4. | 3 = | | OR | X86=. | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | CLAIM | | +14 | | | OR | +290= | |
| | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | | | | OΒ | TOTAL | <u> </u> |
| *** | f the "Highest Nur | nber Previously Pa mber Previously Pa ber Previously Paid | aid For IN THE | S SPACE is | s less tha | n 3, enter "3." | ADDIT. | | propriate box | ٠. | ADDIT. FEE lumn 1. | L |